Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself					
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
Your full name					
Write the name that is on your government-issued picture identification (for	Ralph First name	-	First name		
example, your driver's license or passport).	J. Middle name	_	Middle name		
Bring your picture identification to your meeting with the trustee.	Mowery Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)		
All other names you have used in the last 8 years	Ralph Josh Mowery Ralph Howard Mowery				
Include your married or maiden names.	Ralph H. Mowery				
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7146				
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. All other names you have used in the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Ralph First name Mowery Last name and Suffix (Sr., Jr., II, III) Ralph Josh Mowery Ralph Howard Mowery Ralph H. Mowery xxx-xx-7146	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. About Debtor 1: Ralph First name J. Middle name Mowery Last name and Suffix (Sr., Jr., II, III) Ralph Josh Mowery Ralph Howard Mowery Ralph Howard Mowery Ralph H. Mowery Nonly the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number Ralph First name J. Middle name **Mowery** All other names you have used in the last 8 years Include your married or maiden names. **Apart of the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number**		

De	btor 1 Ralph J. Mowery		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		8 Armour Street Long Beach, NY 11561 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Nassau County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Filed 02/01/19 Entered 02/01/19 11:57:31 Case 8-19-70819-reg Doc 1

2/01/19 11:56AM Debtor 1 Case number (if known) Ralph J. Mowery Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

Go to line 12.

No. Go to line 12.

this bankruptcy petition.

No.

☐ Yes.

11. Do you rent your

residence?

Deb	otor 1 Ralph J. Mowery				Case number (if known)	2/01/19 11:56AM		
Par	Report About Any Bu	sinesses	You Owr	n as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	e and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	ame of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Sta	te & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as o	defined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the abov	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am ı	not filing under Chap	pter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in t	he Bankruptcy		
		☐ Yes.	I am f	filing under Chapter	11 and I am a small business debtor according to the definition in the Ba	ankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?				
	public health or safety? Or do you own any							
	property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?				
	urgent repairs?				Number, Street, City, State & Zip Code			

Debtor 1 Ralph J. Mowery

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Ralph J. Mowery			Case number (if k	nown)			
Part	6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consunindividual primarily for a personal,	ner debts? Consumer debts are defined if family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
				ss debts? Business debts are debts that or through the operation of the business				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	at are not consumer debts or business de	bts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	\$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	= \$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Part	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
				aware that I may proceed, if eligible, und vailable under each chapter, and I choose				
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. /s/ Ralph J. Mowery						
		Ralph J.	Mowery of Debtor 1	Signature of Debtor 2				
		Executed	on February 1, 2019 MM / DD / YYYY	Executed on MM / DD	D/YYYY			

Debtor 1 Ralph J. Mowery	∨ Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have entered to the o	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)	
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	vledge after an inquiry that the information in the	
	/s/ Robert H. Solomon, Esq.	Date	February 1, 2019	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Robert H. Solomon, Esq.			
	Robert H. Solomon, P.C.			
	Firm name			
	24 East Park Avenue			
	Suite 200			
	Long Beach, NY 11561			
	Number, Street, City, State & ZIP Code			
	Contact phone 516-432-1622	Email address	rob@solomonlawyer.com	
	NY			
	Par number & Ctate			

							2/01/19 11:56AM
HIII	n this informa	ation to identify your	case:				
Debt	or 1	Ralph J. Mowery	Middle Name	Last Name			
Debt	or 2	riist name	wilddie Name	Last Name			
(Spou	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Banl	kruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK			
Case	e number						
(if kno						☐ Chec	k if this is an
						amen	ded filing
Off	icial For	m 106Sum					
			and Liabilities a	and Certain Statistical I	nformation		12/15
infor	mation. Fill or original form	ut all of your schedul	es first; then complete	le are filing together, both are equather information on this form. If you ck the box at the top of this page.			
ran	. Camma	nize Tour Addets					
						Your a	issets of what you own
	Cabadula A/I	D. Duamantos (Official E	40CA /D)				
1.	1a. Copy line	3: Property (Official F 55, Total real estate, f	rom Schedule A/B			\$	412,772.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/E	3		\$	15,041.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	427,813.00
Part	2: Summa	rize Your Liabilities					
rait	Z. Sullilla	lize rour Liabilities					
							i abilities nt you owe
0	0-1	0	/- ' O / / D	de (O(Cetal Farrer 400D)		7	,
			laims Secured by Proper mn A, Amount of claim, a	at the bottom of the last page of Part	1 of Schedule D	\$	420,448.00
3.	Schedule F/F	· Creditors Who Have	Unsecured Claims (Offic	ial Form 106F/F)			
0.	3a. Copy the	total claims from Part	1 (priority unsecured clai	ims) from line 6e of Schedule E/F		\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F.		\$	9,301.97
							,
				Yo	our total liabilities	\$	429,749.97
							·
Part	3: Summa	rize Your Income and	I Expenses				
4.	Schedule I: V	our Income (Official Fo	orm 106I)				
				ıle I		\$	6,681.51
5.	Schedule J: \	our Expenses (Officia	I Form 106J)				
	Copy your mo	onthly expenses from I	ine 22c of Schedule J			\$	6,642.00
Part	4: Answer	These Questions for	Administrative and Sta	atistical Records			
6.	Are vou filing	g for bankruptcy und	er Chapters 7, 11, or 13	1?			
٥.	•		•	Check this box and submit this form t	to the court with yo	ur other sc	hedules.
	Yes						
7.		debt do you have?					
		·					
				r debts are those "incurred by an indi- -9g for statistical purposes. 28 U.S.C		a personal	, family, or
				have nothing to report on this part of the		s hav and s	ubmit this form to
		t with your other sched		iave notiling to report on this part of the	ne ioini. Oneck inis	s DUX and S	MADITIIL LIIIS IOIIII LO
Offic	ial Form 1069	um Summary	of Your Assets and Lial	hilities and Certain Statistical Infor	mation		nage 1 of 2

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Ralph J. Mowery Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,929.27

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	al claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

-111 1			1.41					
	n this information	on to identify	your case and th	is tiling	j:			
Debt	_	Ralph J. Mo		Name	Last Name			
Debt		iist Name	Middle	Name	Last Name			
		irst Name	Middle	Name	Last Name			
Jnite	d States Bankru	ptcy Court for	the: EASTERN	DISTRI	CT OF NEW YORK			
2004	numbor							—
	number							Check if this is an amended filing
)ff	cial Form	106A/E	3					
<u>S</u> c	hedule /	4/B: Pi	ropertv					12/15
				an asset	only once. If an asset fits in more than o	ne category lis	t the asset in	the category where you
	No. Go to Part 2. Yes. Where is the	property?						
1.1				What	is the property? Check all that apply			
-	8 Armour				Single-family home			ims or exemptions. Put
	Street address, if avail	lable, or other des	scription		Duplex or multi-unit building			I claims on Schedule D: ns Secured by Property.
					Condominium or cooperative			
					Manufactured or mobile home			
	Long Beach	NY	11561-0000		Land	Current va entire prop		Current value of the portion you own?
_	City	State	ZIP Code		Investment property	\$412,772.00		\$412,772.00
				Timeshare	Describe t	Describe the nature of your owner		
					Other		ee simple, tena e), if known.	ancy by the entireties, or
					has an interest in the property? Check one Debtor 1 only	Joint ter	•	
	Nassau							
-	County				Debtor 1 and Debtor 2 only			
					At least one of the debtors and another		t if this is com structions)	munity property
					r information you wish to add about this it erty identification number:	,	,	
				p. op				
					your entries from Part 1, including ar			

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 8-19-70819-reg Doc 1 Filed 02/01/19 Entered 02/01/19 11:57:31 2/01/19 11:56AM Debtor 1 Case number (if known) Ralph J. Mowery 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Hyundai Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Tuscon SUV** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2011 Year: Debtor 2 only Current value of the Current value of the 62000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$5,234.00 \$5,234.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Nissan Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Altima Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2009 Year: Debtor 2 only Current value of the Current value of the 36000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$3,857.00 \$3,857.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$9,091.00 .pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$2,500.00 Miscellaneous household goods and furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 2 tv \$500.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

2/01/19 11:56AM Debtor 1 Case number (if known) Ralph J. Mowery 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$750.00 Miscellaneous wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,750.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$100.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$1,000.00 **Chase 6503** 17.1. Checking

Citibank 6122

Schedule A/B: Property

\$100.00

Official Form 106A/B

17.2. Checking

Doc 1 Filed 02/01/19 Entered 02/01/19 11:57:31 Case 8-19-70819-reg 2/01/19 11:56AM Debtor 1 Case number (if known) Ralph J. Mowery 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

☐ Yes. Go to line 38.

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Official Form 106A/B Schedule A/B: Property

page 5

				2/01/19 11:56AM
Deb	otor 1 Ralph J. Mowery		Case number (if known)	
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	t?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	hat number here		\$0.00
_				
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$412,772.00
56.	Part 2: Total vehicles, line 5	\$9,091.00	-	
57.	Part 3: Total personal and household items, line 15	\$3,750.00		
58.	Part 4: Total financial assets, line 36	\$2,200.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$15,041.00	Copy personal property total	\$15,041.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$427,813.00

Official Form 106A/B Schedule A/B: Property page 6

						2/01/19 11:56AM
Fil	ll in this informa	ation to identify your ca	ase:			
De	ebtor 1	Ralph J. Mowery				
		First Name	Middle Name	L	ast Name	
	ebtor 2 oouse if, filing)	First Name	Middle Name	L	ast Name	
Ur	nited States Banl	kruptcy Court for the:	EASTERN DISTRICT OF N	=W Y(ORK	
01	ilica Otates Bari	dupley Court for the.	ENOTE IN BIOTHER OF THE			
	ase number known)					☐ Check if this is an amended filing
O.	fficial For	m 106C				
S	chedule	C: The Pro	perty You Cla	im	as Exempt	4/16
the nee	property you list	ed on Schedule A/B: Proattach to this page as m	operty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	ecific dollar amo y applicable sta ids—may be un emption to a pa	ount as exempt. Altern tutory limit. Some exer limited in dollar amour	atively, you may claim the f nptions—such as those for nt. However, if you claim an	ull fai heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Pa	rt 1: Identify	the Property You Clair	n as Exempt			
1.	Which set of e	exemptions are you cla	iming? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are clai	ming state and federal n	onbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	You are clai	ming federal exemptions	s. 11 U.S.C. § 522(b)(2)			
2.	For any prope	rty you list on Schedu	le A/B that you claim as exe	mpt.	fill in the information below.	
		n of the property and line	Specific laws that allow exemption			
		at lists this property	on Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	
	8 Armour Lo Nassau Cou	ng Beach, NY 11561		•	\$5,685.00	11 U.S.C. § 522(d)(1)
	Line from Sche	•			100% of fair market value, up to any applicable statutory limit	
	2009 Nissan	Altima 36000 miles	\$3,857.00		\$3,775.00	11 U.S.C. § 522(d)(2)
	Line nom Sche	edule A/D. 3.2			100% of fair market value, up to any applicable statutory limit	
		Altima 36000 miles	\$3,857.00		\$82.00	11 U.S.C. § 522(d)(5)
	Line from Sche	eaule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	Miscellaneo	us household goods	and \$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(3)
	Line from Sche	edule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	2 tv		\$500.00		\$500.00	11 U.S.C. § 522(d)(3)

Official Form 106C

100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 7.1

Debt	or 1 Ralph J. Mowery			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Miscellaneous wearing apparel Line from Schedule A/B: 11.1	\$750.00	•	\$750.00	11 U.S.C. § 522(d)(3)
	Life Holli Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
L	Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase 6503 Line from Schedule A/B: 17.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
<u>l</u>	Line Irom Scriedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Citibank 6122 Line from Schedule A/B: 17.2	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
L	Line Hom Schedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
	Federal: Tax Refund expected	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
L	Line Hom Schedule A/B. 20.1			100% of fair market value, up to any applicable statutory limit	
(I	Are you claiming a homestead exemption Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No	3 years after that for ca	ises fi	•	,
	☐ Yes				

						2/01/19 11:56AM
Fill i	n this informa	ation to identify you	r case:			
Debt	tor 1	Ralph J. Mowery	,			
Debi	101 1	First Name	Middle Name Last Name			
Debt	tor 2					
	se if, filing)	First Name	Middle Name Last Name			
			EACTED UDIOTRICT OF NEW YORK			
Unite	ed States Bank	cruptcy Court for the:	EASTERN DISTRICT OF NEW YORK			
Case	e number					
(if kno					☐ Check	if this is an
,	ŕ				_	led filing
						.oug
Offi	cial Form	106D				
			Miss Have Olsins Coass	l la D		
SCI	neaule L): Creditors	Who Have Claims Secure	ed by Propert	y	12/15
Ro as	complete and a	accurate as nossible l	f two married people are filing together, both are	equally responsible for su	nnlying correct informa	tion If more space
			but, number the entries, and attach it to this form.			
numb	er (if known).					
1. Do	any creditors h	ave claims secured by	your property?			
[☐ No. Check t	his box and submit th	nis form to the court with your other schedules.	You have nothing else to	o report on this form.	
_	_		•			
	Yes. Fill in a	all of the information b	Delow.			
Part	1: List All	Secured Claims				
2. Lis	st all secured cl	aims. If a creditor has n	nore than one secured claim, list the creditor separat	ely Column A	Column B	Column C
for ea	ach claim. If mor	e than one creditor has	a particular claim, list the other creditors in Part 2. A	s Amount of claim	Value of collateral	Unsecured
much	n as possible, list	the claims in alphabetic	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
	Santander	Consumer		value of collateral.	Ciaiiii	папу
2.1	USA	o ci i cui i i ci	Describe the property that secures the claim:	\$13,361.00	\$5,234.00	\$8,127.00
	Creditor's Name		2011 Hyundai Tuscon SUV 62000			
			miles			
	Attn: Bankr	ruptcv				
	Po Box 961		As of the date you file, the claim is: Check all that			
	Fort Worth,	TX 76161	apply. Contingent			
	Number Street C	ity, State & Zip Code	☐ Unliquidated			
	rambor, oncor, o	my, clate a zip code	☐ Disputed			
Who	owes the deb	t? Check one	Nature of lien. Check all that apply.			
_		. Chican chica	☐ An agreement you made (such as mortgage or	socured		
	ebtor 1 only		car loan)	secureu		
_	ebtor 2 only		_			
	ebtor 1 and Deb	•	Statutory lien (such as tax lien, mechanic's lien)			
_		debtors and another	☐ Judgment lien from a lawsuit			
	heck if this clai		Other (including a right to offset)			
C	community debt					
		Opened				
		04/16 Last				
		Active				
Date	debt was incur	red 11/30/18	Last 4 digits of account number 1000	0		
			<u> </u>			
2.2	Seterus, Inc	r.	Describe the property that secures the claim:	\$407,087.00	\$412,772.00	\$0.00
2.2	Creditor's Name		8 Armour Long Beach, NY 11561	1	Ψ+12,112.00	Ψ0.00
			Nassau County			
	Attn: Bankr	runtev	-			
	Po Box 107		As of the date you file, the claim is: Check all that	•		
	Hartford, C		apply. Contingent			
		ity, State & Zip Code	☐ Unliquidated			
	. tamber, oueer, o	, State & Zip Out	☐ Disputed			
Who	owes the deb	t? Check one	Nature of lien. Check all that apply.			
			☐ An agreement you made (such as mortgage or	secured		
_	ebtor 1 only		car loan)	occureu		
	ebtor 2 only ebtor 1 and Deb	tor 2 only	<u> </u>			
_			Statutory lien (such as tax lien, mechanic's lien)			
A	t least one of the	debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

Del	btor 1 Ralph J. N	lowery		Case number (if known)						
	First Name	Middle N	lame Last Name							
	Check if this claim re community debt	elates to a	Other (including a right to offset)			_				
Dat	e debt was incurred	Opened 01/09 Last Active 9/14/17	Last 4 digits of account number	1993						
If W	this is the last page of the that number here	of your form, add e:	Column A on this page. Write that number the dollar value totals from all pages.	here:	\$420,448.00 \$420,448.00					
Use tryii	e this page only if you	u have others to b u for a debt you o y of the debts that	owe to someone else, list the creditor in Pa t you listed in Part 1, list the additional cre	art 1, and then	eady listed in Part 1. For example, if a collection agency is list the collection agency here. Similarly, if you have more you do not have additional persons to be notified for any					
Name, Number, Street, City, State & Zip Conshiption Dicaro Barak 175 Mile Crossing Blvd. Rochester, NY 14624		reet, City, State & . o Barak sing Blvd.			ne in Part 1 did you enter the creditor?s of account number					

Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your						2/01/19 11:56AN			
Prior Name Middle Name Last Name L	Fill in this info	ormation to identify your ca	ise:						
Prist Name	Debtor 1	Ralph J. Mowerv							
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number (if thrown) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Bas complets and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to say executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB Property (Official Form 106A/B) and on Schedule D: Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the first Attach the Continuation Page of this page, If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 32: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No Go to Part 2. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims in the alphabetical order of the creditor shave nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims in the alphabetical order of the creditor has more than then nonpriority unsecured claims in the alphabetical order of the creditor has more than the nonpriority unsecured claims in			Middle Name	Last Name	_				
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number		First Namo	Middle Name	Last Namo					
Case number Check if this is an amended filing Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIGRITY claims and Part 2 for creditors with NONPRIGRITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule I/Os. Property (fine) and on Schedule I/Os. Property of Inficial Form 106/I/O) and on Schedule I/Os. Property of Inficial Form 106/I/O) and on Schedule I/Os. Property of Inficial Form 106/I/O) and on Schedule I/Os. Property of Inficial Form 106/I/O) and on Schedule I/Os. Property I/Os. Propert	(Spouse II, IIIIIIg)	i iist ivaine							
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Base complete and accurate as possible. Use Part 1 for creditors with PRIDRITY claims and Part 2 for creditors with MONPRIDRITY contracts or in explored leases that could result in a claim. Also list executory contracts on Schedule Alte. Property (Official Form 1064B) and on Schedule C: Executory Contracts and Unexplied Leases (Official Form 1064B). Do not include any creditors with have under the horizon in 108AB) and on Schedule C: Executory Contracts and Unexplied Leases (Official Form 1064B). Do not include any creditors with executed claims secured by Property, if more space is needed, copy the Part you need, (III in cut, unbed the art is listed in left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 12: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.	United States I	Bankruptcy Court for the:	EASTERN DISTR	ICT OF NEW YORK					
Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims. List the other party to may executory contracts or unscripride clases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 1064) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 1064). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors With Part Claims Secured by Property II more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number of known. Part 12: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. 50 to Part 2. Yes.									
any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases (Picial Form 166AB) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 166D). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims No. Go to Part 2. No. Go to Part 2. Yes. Part 2: List All of Your NoNPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. CCS Nonpriority Creditor's Name Payment Processing Center PO Box 55126 Boston, MA 02205 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Number Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Debtor 1 only Debtor 2 only No Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debt	Schedule	E/F: Creditors Wh							
List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. CCS Last 4 digits of account number 2478 Nonpriority Creditor's Name Payment Processing Center PO Box 55126 Boston, MA 02205 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NonPRIORITY unsecured claims: Type of NonPRIORITY unsecured claims: Student loans debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Debtor 2 only Disputed Disput	Schedule G: Exe Schedule D: Cre left. Attach the C name and case r Part 1: List 1. Do any crec	cutory Contracts and Unexpir ditors Who Have Claims Secur ontinuation Page to this page number (if known). All of Your PRIORITY Uns ditors have priority unsecured	ed Leases (Official F red by Property. If m If you have no info ecured Claims	Form 106G). Do not include iore space is needed, copy rmation to report in a Part, (any creditors with partially s the Part you need, fill it out, ı	secured claims that are listed in number the entries in the boxes on the			
List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. Ves. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Ves. State 1 digits of account number 2478 \$954.51 CCS	_	ο Ραπ 2.							
3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.		All of Vour MONDDIODITY	Unaccured Claim						
No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. CCS									
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. CCS									
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1	☐ No. You	have nothing to report in this par	t. Submit this form to	the court with your other sche	edules.				
unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. CCS	Yes.								
4.1 CCS Nonpriority Creditor's Name Payment Processing Center PO Box 55126 Boston, MA 02205 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? No No Debts to pension or profit-sharing plans, and other similar debts Last 4 digits of account number 2478 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51 \$954.51	unsecured c than one cre	laim, list the creditor separately f	or each claim. For ea	ich claim listed, identify what t	ype of claim it is. Do not list cla	aims already included in Part 1. If more			
Nonpriority Creditor's Name Payment Processing Center PO Box 55126 Boston, MA 02205 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 2018 When was the debt incurred? Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply	Turt 2.					Total claim			
Nonpriority Creditor's Name Payment Processing Center PO Box 55126 Boston, MA 02205 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 2018 When was the debt incurred? Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply	4.1 CCS		Last 4	I digits of account number	2478	\$954.51			
PO Box 55126 Boston, MA 02205 Number Street City State ZIp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	Nonprio	•							
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts do separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	PO B	ox 55126	When	was the debt incurred?	2018				
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	Numbe	r Street City State Zlp Code	As of	the date you file, the claim i	s: Check all that apply				
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	■ Deb	tor 1 only	□co	ontingent					
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	☐ Deb	tor 2 only	☐ Un	liquidated					
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts	☐ Deb	tor 1 and Debtor 2 only	☐ Dis						
debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims No	☐ At le	east one of the debtors and anoth	ner Type	of NONPRIORITY unsecured	d claim:				
debt Is the claim subject to offset? ■ No Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	☐ Che	ck if this claim is for a comm	unity 🔲 Stu	udent loans					
■ No □ Debts to pension or profit-sharing plans, and other similar debts	debt		Ob		ration agreement or divorce th	at you did not			
		iaini subject to offset?	·		a plans, and other similar debt	s			
□ Yes □ Other. Specify				·					
	⊔ Yes		■ Ott	her. Specify					

Official Form 106 E/F

Debte	Pr 1 Ralph J. Mowery		Case number (if known)								
4.2	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	3978	\$5,282.00							
	Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 02/06 Last Active 7/25/13								
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i									
	■ Debtor 1 only	☐ Contingent									
	Debtor 2 only	☐ Unliquidated	☐ Unliquidated ☐ Disputed								
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:									
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not								
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts								
	☐ Yes	■ Other. Specify Credit Card	<u> </u>								
4.3	CityMD	Last 4 digits of account number	5560	\$100.00							
	Nonpriority Creditor's Name 1345 RXR Plaza Uniondale, NY 11556	When was the debt incurred?	2018								
	Number Street City State Zlp Code Who incurred the debt? Check one.	is: Check all that apply									
	■ Debtor 1 only										
	■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated										
	Debtor 1 and Debtor 2 only										
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	No	Debts to pension or profit-sharing	Debts to pension or profit-sharing plans, and other similar debts								
	Yes	Other. Specify									
4.4	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	4707	\$672.00							
	Kohls Credit Po Box 3120	When was the debt incurred?	Opened 11/07 Last Active 9/13/14								
	Milwaukee, WI 53201 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply								
	■ Debtor 1 only	■ Debtor 1 only □ Contingent									
	Debtor 2 only	Debtor 2 only									
	☐ Debtor 1 and Debtor 2 only										
	\square At least one of the debtors and another	<u> </u>									
	☐ Check if this claim is for a community										
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not								
	No	g plans, and other similar debts									
	Yes	■ Other. Specify Charge Acc	count								

Doc 1 Filed 02/01/19 Entered 02/01/19 11:57:31 Case 8-19-70819-reg 2/01/19 11:56AM Debtor 1 Ralph J. Mowery Case number (if known) LVNV Funding/Resurgent Capital 4.5 \$606.00 Last 4 digits of account number 6799 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 09/16** Po Box 10497 Greenville, SC 29603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Credit One** Other. Specify Bank N.A. ☐ Yes 4.6 **Prohealth Care Assoc** Last 4 digits of account number 9054 \$100.00 Nonpriority Creditor's Name PO Box 3475 When was the debt incurred? 2018 Toledo, OH 43607-0475 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **Quest Diagnostics** \$30.24 Last 4 digits of account number 1381 Nonpriority Creditor's Name PO Box 7306 When was the debt incurred? 2018 Hollister, MO 65673-7306 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only

☐ Debtor 1 and Debtor 2 only At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No ☐ Yes ■ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

Doc 1 Filed 02/01/19 Entered 02/01/19 11:57:31 Case 8-19-70819-reg 2/01/19 11:56AM Debtor 1 Ralph J. Mowery Case number (if known) 4.8 Last 4 digits of account number \$50.00 **Sunrise Medical Lab** 4850 Nonpriority Creditor's Name PO Box 9070 When was the debt incurred? 2018 Hicksville, NY 11802-9070 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 Syracuse University Proj \$687.00 Last 4 digits of account number 3305 Nonpriority Creditor's Name 400 Ostrom Avenue When was the debt incurred? 2017 Syracuse, NY 13244-3250 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Tate & Kirlin Associates** 3388 \$606.22 Last 4 digits of account number Nonpriority Creditor's Name 580 Middletown Blvd When was the debt incurred? 2018 Suite 240 Langhorne, PA 19047 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

■ No

■ No □ Yes ☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

ebtor 1 Ralph J. Mowery	Case number (if known)						
Visa Dept Store National Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	5020	\$214.00				
Attn: Bankruptcy Po Box 8053	When was the debt incurred?	Opened 02/92 Last Active 9/03/13					
Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
■ Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
■ No	Debts to pension or profit-sharing plans, and other similar debts						
Yes	Other. Specify Charge Acc	count					

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Te	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				<u></u>	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
				ψ	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				To	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	9,301.97
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	9,301.97

Fill in this inform	nation to identify your				
Debtor 1	Ralph J. Mowery				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK					
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1			·		
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	•				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	_ · · ,		3.000		
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Official Form 106G

					2/01/19 11:56A
Fill in thi	is information to identify your	case:			
Debtor 1	Ralph J. Mowery				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case nur	mber				
(if known)				_	theck if this is an mended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
ill it out, rour nam 1. Do No Ye 2. Wi Arizo	and number the entries in the le and case number (if known) by you have any codebtors? (If	boxes on the left. Attach. Answer every question. you are filing a joint case, of the left of the lef	the Additional Page to do not list either spouse a operty state or territory erto Rico, Texas, Washir	? (Community property states and t	itional Pages, write
in lir Forn	ne 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make s	if your spouse is filing with you. L ure you have listed the creditor o iG). Use Schedule D, Schedule E/	n Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to who Check all schedules that apply:	om you owe the debt
3.1	Kelly Stacey Mowery			■ Schedule D, line □ Schedule E/F, line □ Schedule G Seterus, Inc.	_

	in their information to in	Jan 4:6					I				
	in this information to identify the interest of the interest o	alph J. Mov									
	otor 2 ouse, if filing)					_					
Uni	ted States Bankruptcy	Court for the	EASTERN DISTRICT	OF NEW YORK		_					
	se number nown)							nended plemen	t showir	ng postpetition ollowing date:	
0	fficial Form 1	<u>06I</u>					MM / [DD/ YY	YY		
S	chedule I: Yo	our Inc	ome								12/15
sup spo atta	plying correct inform use. If you are separa ch a separate sheet t	ation. If you ated and you	ible. If two married peo are married and not fili r spouse is not filing wi On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i de inforn	s livi natio	ing with you, on about you	, includ Ir spou	le infori se. If m	mation about ore space is	your needed,
1.	Fill in your employr information.	in your employment ormation.		Debtor 1			Dek	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			= 1	■ Employed				
		0	, ,	☐ Not employed			-	☐ Not employed			
	employers.		Occupation	Actor			Act	tor			
	Include part-time, se self-employed work.	asonai, oi	Employer's name								
	Occupation may include or homemaker, if it a		Employer's address								
			How long employed t	here?							
Par	rt 2: Give Detail	s About Mon	thly Income								
spoi	mate monthly income use unless you are sep	e as of the da	ate you file this form. If	, c						•	J
	u or your non-filing spo e space, attach a sepa		re than one employer, co this form.	ombine the informatio	n for all e	mplo	oyers for that p	person	on the l	ines below. If	you need
							For Debtor	1		btor 2 or ing spouse	
2.			ry, and commissions (be calculate what the monthle		2.	\$	0	0.00	\$	0.00	
3.	Estimate and list m	onthly overti	me pay.		3.	+\$	0	.00	+\$	0.00	
4.	Calculate gross Inc	ome. Add lin	e 2 + line 3.		4.	\$	0.0	0	\$	0.00	

Debt	or 1	Ralph J. Mowery	_		Case	number (if known)		
			_					
					For	Debtor 1	F	or Debtor 2 or
					. 0.	Debtor 1		on-filing spouse
	Copy	y line 4 here	4.		\$	0.00	\$	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a	1.	\$	0.00	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.00	\$	
	5c.	Voluntary contributions for retirement plans	5c	; .	\$	0.00	\$	
	5d.	Required repayments of retirement fund loans	5d	i.	\$_	0.00	\$	
	5e.	Insurance	5e) .	\$	0.00	\$	0.00
	5f.	Domestic support obligations	5f.		\$	0.00	\$	0.00
	5g.	Union dues	5g	J.	\$_	0.00	\$	0.00
	5h.	Other deductions. Specify:	5h	1.+	\$	0.00	+ \$	0.00
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0.00	\$	0.00
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0.00	\$	0.00
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b		\$-	0.00	\$	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			*_	0.00	•	0.00
		settlement, and property settlement.	8c) .	\$	0.00	\$	0.00
	8d.	Unemployment compensation	8d		\$_	0.00	\$	
	8e.	Social Security	8e) .	\$_	0.00	\$	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$_	0.00	\$	0.00
	8g.	Pension or retirement income	8g		\$	0.00	\$	
	8h.	Other monthly income. Specify: United Pension	8h	1.+	\$	1,261.51	+ \$	0.00
		Social Security			\$	1,668.00	\$	0.00
		Acting Jobs	_		\$_	1,876.00	\$	1,876.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	4,805.51	\$	1,876.00
10	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$		4,805.51 + \$		1,876.00 = \$ 6,681.51
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		4,803.31 · ⁴ -		1,070.00
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	depe			•	•	
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						
13.	Do y	ou expect an increase or decrease within the year after you file this form	?					monthly income
		No.						
		Yes. Explain:						

Fill	in this informa	ition to identify yo	our case:							
	otor 1	Ralph J. Mov				Check	if this is:			
	Kaipii o. mowery				☐ An amended filing					
	Debtor 2 Spouse, if filing)					A supplement showing postpetition chapter 13 expenses as of the following date:				
(Spt	ouse, ii iiiirig)							ine following date.		
Unit	ed States Bankı	ruptcy Court for the	: EASTE	N	MM / DD / YYYY					
	e number nown)									
Of	fficial Fo	rm 106J								
So	chedule	J: Your	Exper	ises				12/15		
Be info	as complete ormation. If m	and accurate as	possible eded, atta	If two married people ar ch another sheet to this						
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold							
••	No. Go to									
	☐ Yes. Doe	es Debtor 2 live	in a separ	ate household?						
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	hold of Debto	or 2.			
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?		
	Do not state	the						□ No		
	dependents	names.			daughter		18	■ Yes		
					con		20	□ No ■		
					son			■ Yes □ No		
								☐ Yes		
								□ No		
								☐ Yes		
3.	expenses o	penses include f people other t d your depende	han 👝	No Yes						
		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
				government assistance i			v			
(Off	ficial Form 10)6I.)					Your expe	enses		
4.	The rental of payments ar	or home owners and any rent for th	hip expen e ground o	ses for your residence. In	nclude first mortgage	4. \$		2,700.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a. \$		0.00		
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00		
		•	•	ıpkeep expenses		4c. \$		0.00		
_		owner's associat				4d. \$		0.00		
5.	Additional r	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00		

Deb	tor 1	Ralph J. Mowery		ber (if known)					
6.	Utilit	ies:							
	6a.	Electricity, heat, natural gas	6a.	\$	240.00				
	6b.	Water, sewer, garbage collection	6b.	\$	40.00				
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	150.00				
	6d.	Other. Specify: national grid	6d.	\$	112.00				
		cell		\$	350.00				
7.	Food	and housekeeping supplies		\$	1,000.00				
8.	Child	Icare and children's education costs	8.	\$	200.00				
9.	Cloth	ning, laundry, and dry cleaning	9.	\$	100.00				
10.		onal care products and services	10.	\$	200.00				
11.	Medi	cal and dental expenses	11.	\$	50.00				
12.	2. Transportation. Include gas, maintenance, bus or train fare.								
		ot include car payments.	\$	200.00					
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00				
14.	Char	itable contributions and religious donations	14.	\$	0.00				
15.	Insur								
		ot include insurance deducted from your pay or included in lines 4 or 20.	45-	Φ.					
		Life insurance	15a.	·	0.00				
		Health insurance	15b.	·	200.00				
		Vehicle insurance	15c.	·	400.00				
4.0		Other insurance. Specify:	15d.	\$	0.00				
16.	Spec	•	16.	\$	0.00				
17.		Ilment or lease payments:	4-	•					
		Car payments for Vehicle 1	17a.	·	400.00				
		Car payments for Vehicle 2	17b.	·	200.00				
		Other. Specify:	17c.	· ·	0.00				
		Other. Specify:	17d.	\$	0.00				
18.		payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00				
10		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). r payments you make to support others who do not live with you.	10.	\$	0.00				
13.	Spec		19.	Ψ	0.00				
20.		r real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		our Income					
20.		Mortgages on other property	20a.		0.00				
		Real estate taxes	20b.		0.00				
		Property, homeowner's, or renter's insurance	20c.		0.00				
		Maintenance, repair, and upkeep expenses	20d.		0.00				
		Homeowner's association or condominium dues	20e.	·	0.00				
21.		r: Specify:		+\$	0.00				
۷٠.	Otilio				0.00				
22.		ulate your monthly expenses							
		Add lines 4 through 21.		\$	6,642.00				
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$					
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	6,642.00				
23.	Calc	ulate your monthly net income.							
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	6,681.51				
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	6,642.00				
					,				
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	39.51				
24.	For exmodifi	-	ou file this mortgage	s form? payment to increa	se or decrease because of a				
	□ Ye	es. Explain here:							

Fill in this infor	mation to identify your	case:					
Debtor 1	Ralph J. Mowery						
	First Name	Middle Name	Last Name	_			
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK				
Case number							
(if known)					☐ Check if this is an amended filing		
<u>Official For</u>	<u>m 106Dec</u>						
Declarat	tion About a	n Individual	Debtor's Sc	chedules	12/15		
Doorara	tion / toodt d	THE THICK THE GOLD	D 00001000	Jiiouuioo	12/13		
If two married p	eople are filing together	, both are equally respor	nsible for supplying co	rrect information.			
•		, , ,	11,70				
					ment, concealing property, or		
	y or property by fraud ir I8 U.S.C. §§ 152, 1341, 1		ruptcy case can result	in fines up to \$250,00	0, or imprisonment for up to 20		
years, or botti.	10 0.0.0. 33 102, 1041, 1	515, and 5571.					
Sig	n Below						
0.9							
Did you na	ay or agree to hay some	one who is NOT an attori	nev to help you fill out l	hankruntev forms?			
Dia you po	ly or agree to pay come		noy to note you im out.	ount aptoy formor			
■ No							
□ Yes.	Name of person			Attach Rank	ruptcy Petition Preparer's Notice,		
Declaration, and Signature (Official Form 119)							
					,		
	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules file	ed with this declaration	on and		
	ph J. Mowery		X				
	J. Mowery ure of Debtor 1		Signature of	f Debtor 2			

Date

Date **February 1, 2019**

		ation to identify you							
Debto	or 1	Ralph J. Mowery	Middle Name	Last Name					
Debte	or 2								
(Spous	e if, filing)	First Name	Middle Name	Last Name					
Unite	d States Ban	kruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK					
Case	number								
(if knov	vn)					check if this is an mended filing			
Ott:	-:-! -	··· 407							
	cial For t ement		Affairs for Indivi	duals Filing for B	ankruptcv	4/16			
inforn numb	nation. If mo er (if known	ore space is needed,). Answer every que	attach a separate sheet to stion.	o this form. On the top of an	equally responsible for sup y additional pages, write you				
Part 1. V		current marital statu	erital Status and Where Yo	u Livea Before					
·· •	mat is your	current maritar state							
Į	Married								
L		led							
2. [During the last 3 years, have you lived anywhere other than where you live now?								
I	No								
	Yes. List	all of the places you I	<i>I</i> .						
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there			
					ity property state or territory ico, Texas, Washington and W				
	No								
	Yes. Mal	ce sure you fill out Scl	nedule H: Your Codebtors (C	Official Form 106H).					
Part :	Explair	the Sources of You	r Income						
F	ill in the total	amount of income yo	u received from all jobs and	ng a business during this ye all businesses, including part ve together, list it only once ur		ndar years?			
[☐ No ■ Yes. Fill	n the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,131.00	■ Wages, commissions, bonuses, tips	\$0.00			

Debtor	1 <u>R</u> a	lph J. Mov	/ery		Case	e number (if known)		2/01/19 11:56A	
				Debtor 1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
		dar year: December 3	31, 2018)	■ Wages, commissions, bonuses, tips	\$8,500.00	☐ Wages, commissions, bonuses, tips			
				☐ Operating a business		☐ Operating a	business		
		dar year bef December 3		■ Wages, commissions, bonuses, tips	\$60,778.00	☐ Wages, com bonuses, tips	missions,		
				☐ Operating a business		Operating a	business		
	No	Fill in the de	•	Debtor 1 Sources of income	Gross income from	Debtor 2		Gross income	
		Fill in the de	ails.						
				Describe below.	each source (before deductions and exclusions)	Sources of inc Describe below		(before deductions and exclusions)	
Part 3:	List	Certain Pay	ments You	Made Before You Filed for I	Bankruptcy				
6. Ard	e either No.	Neither De individual p	btor 1 nor E rimarily for a 90 days befo Go to line 7 List below 6	each creditor to whom you paid	timer debts. Consumer debts d purpose." d you pay any creditor a tota d a total of \$6,425* or more i	I of \$6,425* or mo	re? vments and the	e total amount you	
		* Subject t	not include	hat creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do clude payments to an attorney for this bankruptcy case. stment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.					
	Yes.			r both have primarily consure you filed for bankruptcy, die		I of \$600 or more?	,		
		■ No.	Go to line 7						
		□ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.					
C	reditor'	s Name and	Address	Dates of payme	nt Total amount	Amount you	Was this pa	yment for	

still owe

paid

Doc 1 Filed 02/01/19 Entered 02/01/19 11:57:31 Case 8-19-70819-reg 2/01/19 11:56AM Debtor 1 Ralph J. Mowery Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Jh Portfolio Debt Equities Llc vs JUDGEMENT LIEN NASSAU COUNTY CLERK □ Pending **RALPH MOWERY** □ On appeal JT15000770 ☐ Concluded - 14,996.00 Fannie Mae v. **Foreclosure Nassau County Supreme** Pending 605643/18 Court ☐ On appeal □ Concluded Sale date February 5, 2019 Jh Portfolio Debt Equities Llc vs JUDGEMENT LIEN NASSAU COUNTY CLERK Pending **RALPH MOWERY** ☐ On appeal JT15000770 ☐ Concluded - 14,996.00

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Creditor Name and Address

Describe the Property

Date

Value of the property

Explain what happened

Entered 02/01/19 11:57:31 Case 8-19-70819-reg Doc 1 Filed 02/01/19 2/01/19 11:56AM Debtor 1 Ralph J. Mowery Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was

payment Email or website address made Person Who Made the Payment, if Not You 1/23/19 \$2,000.00 Robert H. Solomon PC 24 East Park Avenue

1/23/19 \$75.00 **Greenpath Credit Counseli**

Long Beach, NY 11561

Debtor 1 Ralph J. Mowery

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.									
	☐ Yes. Fill in the details.									
	Person Who Was Paid Address	Description and vertransferred	Description and value of any property transferred			Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No									
	Yes. Fill in the details.									
	Person Who Received Transfer Address Person's relationship to you	property transferred paym			ny property or received or debts hange	Date transfer was made				
	reason's relationship to you									
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.									
	Name of trust	Description and v	alue of the proper	rty transforro	d	Date Transfer was				
	Name of trust	Description and V	alue of the proper	ity transiene	·u	made				
Par	8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Stora	age Units						
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.									
	Name of Financial Institution and L	ast 4 digits of	Type of account	or Date	e account was	Last balance				
		ccount number	instrument	clos	sed, sold, ved, or usferred	before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		escribe the c	ontents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	No									
	Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the c	ontents	Do you still have it?				

Debtor 1 Case number (if known) Ralph J. Mowery Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. п **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Environmental law, if you Name of site Governmental unit Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
□ A member of a limited liability company (LLC) or limited liability partnership (LLP)
□ A partner in a partnership
□ An officer, director, or managing executive of a corporation
□ An owner of at least 5% of the voting or equity securities of a corporation

Official Form 107

Case 8-19-70819-reg Doc 1 Filed 02/01/19 Entered 02/01/19 11:57:31

			2/01/19 11:56A
Del	otor 1 Ralph J. Mowery		Case number (if known)
	■ No. None of the above applies. Go to	Part 12.	
	☐ Yes. Check all that apply above and fil	I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to	anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Pai	t 12: Sign Below		
are with		false statement, concealing property, or	I declare under penalty of perjury that the answers robtaining money or property by fraud in connection years, or both.
Ra	Ralph J. Mowery Iph J. Mowery nature of Debtor 1	Signature of Debtor 2	
Dat	February 1, 2019	Date	
Did ■ N		ent of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 107)?
Did ■ N	you pay or agree to pay someone who is no	t an attorney to help you fill out bankrup	tcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform						
	mation to identify your	case:				
Debtor 1	Ralph J. Mowery First Name	Middle Name		Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTR	ICT OF NEW	YORK		
Case number(if known)						Check if this is an amended filing
Official Fo				II I OI		
Statemer	nt of Intentio	n for Indiv	<u>riduais</u>	Filing Under Ch	apter /	12/15
	ividual filing under cha	•	l out this forr	m if:		
_	e claims secured by yo					
You must file thi	ever is earlier, unless th	ithin 30 days after	you file your	bankruptcy petition or by the use. You must also send copie		
	eople are filing togethe	r in a joint case, bo	th are equally	y responsible for supplying co	orrect information	on. Both debtors must
	and accurate as possib our name and case nur		s needed, atta	ach a separate sheet to this fo	rm. On the top	of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims				
1. For any credit	ors that you listed in Pa	art 1 of Schedule D	: Creditors W	/ho Have Claims Secured by P	roperty (Officia	l Form 106D), fill in the
information be				ou intend to do with the prope	rty that D	id you claim the property s exempt on Schedule C?
	Seterus, Inc.			er the property.		l No
name:				the property and redeem it. he property and enter into a		l _{Yes}
Description of property	8 Armour Long Be 11561 Nassau Co	•	Reaffiri	mation Agreement.		
securing debt:		unity		he property and [explain]: ccordance with it's terms		
Part 2: List Yo	our Unexpired Persona	l Branarty Lagge				
For any unexpire in the informatio	ed personal property le	ase that you listed il estate leases. Un	expired lease	G: Executory Contracts and U es are leases that are still in ef oes not assume it. 11 U.S.C. §	fect; the lease	
Describe your u	nexpired personal pro	perty leases			Will th	e lease be assumed?
Lessor's name:					□ No	
Description of lea Property:	ased				☐ Yes	3
Lessor's name: Description of lea	ased				□ No	
Property:	asou				☐ Yes	S
Lessor's name:					□ No	
Official Form 108		Statement of In	tention for In	dividuals Filing Under Chapte	er 7	page 1

Case 8-19-70819-reg Doc 1 Filed 02/01/19 Entered 02/01/19 11:57:31

Debt	or 1	Ralph J. Mowery	Case number (if known	n)
Desc Prop		n of leased		☐ Yes
		ame: n of leased		□ No
Less	or's na	ame: n of leased		□ No □ Yes
Less	or's na	ame: n of leased		□ No
	or's na criptior erty:	ame: n of leased		□ No
Part	3:	Sign Below		
		alty of perjury, I declare that I have indi- nat is subject to an unexpired lease.	icated my intention about any property of my estate that s	ecures a debt and any personal
=	Ralp	alph J. Mowery h J. Mowery ture of Debtor 1	X Signature of Debtor 2	
	Date	February 1, 2019	Date	

Fill in this info	rmation to identify your case:	Check one box only as directed in this form and in Form
Debtor 1	Ralph J. Mowery	122A-1Supp:
Debtor 2 (Spouse, if filing)		■ 1. There is no presumption of abuse
United States Case number	Bankruptcy Court for the: Eastern District of New York	□ 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 122A-2).
(if known)		☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
		☐ Check if this is an amended filing
Official F	Form 122A - 1	
Chanter	7 Statement of Vour Current Month	dy Income

Statement of Your Current Wonthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

quam	ying minuty convice, complete and the etatement of Exem	pt.1011 11 C	,,,,,,,	inputori oi ribuoo	onder 3 r	07(0)(2)(0	olai i olii	,	
Part	1: Calculate Your Current Monthly Income								
1.	What is your marital and filing status? Check one o	nly.							
	□ Not married. Fill out Column A, lines 2-11.								
	$\hfill\square$ Married and your spouse is filing with you. Fill o	ut both	Columns	A and B, lines	2-11.				
	■ Married and your spouse is NOT filing with you.	You ar	nd your s	spouse are:					
	Living in the same household and are not leg	ally sep	oarated.	Fill out both Col	umns A a	and B, lines	2-11.		
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally s	separated	l under nonbanl	kruptcy la	w that appli	es or tha		
10 th	Il in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the tota ouses own the same rental property, put the income from that	nonth pe I by 6. Fi	riod would	be March 1 throu sult. Do not includ	gh August e any inco	31. If the amome amount m	ount of your	ur monthly incom once. For examp	ne varied during le, if both
					Column . Debtor 1			nn B or 2 or iling spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and co	mmissio	ons (before all	\$	971.70	\$	957.57	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payme	ents from	a spouse if	\$	0.00	\$	0.00	
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 0.00									
5.	Net income from operating a business, profession,	or farr	n						
			Deb	tor 1					
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	-\$_	0.00						
	Net monthly income from a business, profession, or fail	rm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00	
6.	Net income from rental and other real property								
				tor 1					
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	-\$	0.00						
	Net monthly income from rental or other real property	\$_	0.00	Copy here ->	\$	0.00	\$	0.00	
7.	Interest, dividends, and royalties				\$	0.00	\$	0.00	

Debto	Ralph J. Mowery			Case number	(if known)			
				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:	t received was a bene	fit under					
	For you\$	0.	00					
	For your spouse \$		00					
	Pension or retirement income. Do not include any an benefit under the Social Security Act.			\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymer manity, or internationa	nts I or					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to		\$	971.70	+ -	957.57		,929.27
Part	2: Determine Whether the Means Test Applies t	o You					income	entinonthy
12.	Calculate your current monthly income for the year	. Follow these steps:						
	12a. Copy your total current monthly income from line	l1		Сору	line 11 h	nere=>	\$1	,929.27
	Multiply by 12 (the number of months in a year)						x 12	
	12b. The result is your annual income for this part of the	e form				12b.	\$23	,151.24
13.	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	NY						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link s		in the separa		13. tions	\$99	,943.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	neck box	1, There is r	o presum	ption of abuse).	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	esumption of	abuse is	determined by	Form 122	4-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information o	n this sta	atement and i	n any atta	achments is tru	ie and corr	ect.
	χ /s/ Ralph J. Mowery							
	Ralph J. Mowery Signature of Debtor 1							
	Date February 1, 2019							
	MM / DD / YYYY If you checked line 14a, do NOT fill out or file Forr	n 122A-2						
	If you checked line 14b, fill out Form 122A-2 and f							
	ii you oncored line 140, lill out I oith 122A-2 dhu i	iio it with this lotti.						

Debtor 1 Ralph J. Mowery

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2018 to 01/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employer : ECS**Constant income of **\$245.44** per month.*

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Elevator Payroll Services

Constant income of \$59.21 per month.*

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Force Residuals CA Inc

Constant income of \$75.04 per month.*

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: GEP CENEX LLC

Constant income of \$592.01 per month.*

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Snapshot Productions Inc.

Constant income of \$0.00 per month.*

Debtor 1 Ralph J. Mowery

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **08/01/2018** to **01/31/2019**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employer**: **ECS**Constant income of **\$28.33** per month.*

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Extreme Reach Talent Inc

Constant income of \$117.08 per month.*

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: GEP CENCAST LLC

Constant income of \$812.16 per month.*

Ralph J. Mowery Debtor 1 Case number (if known) *Paycheck Details: **GEP CENEX LLC** Date **Earnings** Overtime Taxes Other Net Check 475.52 152.53 2018-06-12 0.00 1.20 321.79 2018-07-06 241.75 0.00 64.35 0.90 176.50 237.50 2018-07-30 337.45 0.00 98.92 1.03 410.05 2018-08-07 554.27 0.00 142.92 1.30 2018-08-10 170.00 38.54 0.81 130.65 0.00 2018-09-05 340.81 0.00 100.19 0.43 240.19 2018-09-18 170.00 0.00 38.54 0.81 130.65 2018-10-01 220.50 0.00 56.71 0.88 162.91 2018-10-02 199.00 0.00 49.99 0.85 148.16 2018-10-10 341.00 0.00 100.26 1.03 239.71 2018-11-01 266.38 0.00 73.22 0.00 193.16 2018-11-09 170.00 0.00 38.55 0.81 130.64 2018-11-15 266.38 0.00 73.22 0.00 193.16 2018-11-15 170.00 0.00 38.54 0.00 131.46 2018-11-16 264.00 0.00 72.37 0.60 191.03 2018-12-13 0.00 159.80 214.69 54.62 0.27 2018-12-19 205.00 0.00 51.15 152.99 0.86 4,606.75 0.00 1,244.62 11.78 3,350.35 Totals: **ECS** Date **Earnings** Overtime Taxes Other Net Check 180.00 30.37 149.28 2018-06-22 0.00 0.35 2018-06-22 166.00 0.00 26.73 0.33 138.94 2018-06-22 372.81 0.00 80.50 0.59 291.72 2018-07-20 594.23 0.00 158.75 0.86 434.62 2018-07-27 310.25 0.00 66.37 0.51 243.37 2018-07-27 603.73 0.00 162.36 0.87 440.50 2018-08-03 170.00 0.00 25.84 0.33 143.83 107.61 2018-08-03 36.56 25.83 170.00 0.00 2018-08-03 141.90 170.00 0.00 27.77 0.33 2018-10-10 368.16 0.00 79.30 0.58 288.28 2018-10-19 164.72 200.87 0.00 35.78 0.37 2018-10-26 40.88 179.16 220.44 0.00 0.40 2018-11-23 173.19 0.00 28.60 0.34 144.25 3,699.68 0.00 799.81 31.69 2,868.18 Totals: **Elevator Payroll Services** Overtime Net Check Date **Earnings** Taxes Other 2018-09-23 355.25 0.00 75.90 0.12 279.23 Totals: 355.25 0.00 75.90 0.12 279.23 **Snapshot Productions Inc.** Date Other Overtime Taxes Net Check **Earnings** 329.09 2018-07-27 449.33 0.00 120.24 0.00 2018-07-27 320.09 75.61 0.00 0.00 244.48 0.00 769.42 195.85 0.00 573.57 Totals:

Force Residuals CA Inc

						2/01/19 11.
Debtor '	Ralph J. Mowery			Case number (if ki	nown)	
	Date	Earnings	Overtime	Taxes	Other	Net Check
	2018-10-30	427.50	0.00	84.40	0.60	342.50
	2018-11-05	22.74	0.00	1.74	0.11	20.89
	2010-11-03	22.74	0.00	1.74	0.11	20.03
	Totals:	450.24	0.00	86.14	0.71	363.39
Extre	me Reach Talent Inc					
	Date	Earnings	Overtime	Taxes	Other	Net Check
	2018-10-12	702.49	0.00	50.80	4.68	647.01
	Totals:	702.49	0.00	50.80	4.68	647.01
GEP (CENCAST LLC					
	Date	Earnings	Overtime	Taxes	Other	Net Check
	2018-06-12	244.43	0.00	44.94	0.31	199.18
	2018-06-12	208.31	0.00	35.54	0.86	171.91
	2018-06-28	316.71	0.00	63.72	1.00	251.99
	2018-07-16	389.33	0.00	82.65	1.09	305.59
	2018-07-18	189.00	0.00	30.53	0.24	158.23
	2018-07-18	275.62	0.00	53.04	0.35	222.23
	2018-08-15	409.92	0.00	88.47	0.52	320.93
	2018-08-16	213.00	0.00	36.76	0.87	175.37
	2018-08-30	216.42	0.00	37.66	0.27	178.49
	2018-09-11	330.88	0.00	67.39	0.42	263.07
	2018-09-11	199.00	0.00	33.12	0.42	165.63
	2018-09-11	199.00	0.00	33.12	0.25	165.62
	2018-09-28	650.88	0.00	179.61	1.42	469.85
	2018-10-02	351.89	0.00	74.61	0.44	276.84
	2018-10-03	213.00	0.00	36.76	0.27	175.97
	2018-10-08	244.46	0.00	44.94	0.91	198.61
	2018-10-15	394.06	0.00	83.90	0.50	309.66
	2018-10-15	655.01	0.00	181.17	0.83	473.01
	2018-11-08	281.00	0.00	54.45	0.95	225.60
	2018-11-13	330.44	0.00	67.29	1.02	262.13
	2018-12-05	184.00	0.00	29.23	0.83	153.94
	Totals:	6,496.36	0.00	1,358.91	13.60	5,123.85
ECS						
	Date	Earnings	Overtime	Taxes	Other	Net Check
	2018-09-19	170.00	0.00	25.84	0.33	143.83
	Totals:	170.00	0.00	25.84	0.33	143.83

Case 8-19-70819-reg Doc 1 Filed 02/01/19 Entered 02/01/19 11:57:31

2/01/19 11:56AM

B2030 (Form 2030) (12/15)

		States Bankruptcy (stern District of New Yo					
In 1	e Ralph J. Mowery		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR DI	EBTOR(S)			
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptc	y, or agreed to be paid	to me, for services rendered or to			
	For legal services, I have agreed to accept		\$	2,000.00			
	Prior to the filing of this statement I have received	1	\$	2,000.00			
	Balance Due		\$ <u></u>	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed com	pensation with any other perso	n unless they are mem	bers and associates of my law firm			
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured control of the secured creditors on here. 	atement of affairs and plan white tors and confirmation hearing, reduce to market value; ea tons as needed; preparation	ch may be required; and any adjourned hea xemption planning	rings thereof;			
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.	ee does not include the following ischargeability actions, jud	ng service: dicial lien avoidanc	es, relief from stay actions or			
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement f	or payment to me for r	epresentation of the debtor(s) in			
	February 1, 2019	/s/ Robert H. So	lomon, Esq.				
_	Date	Robert H. Solon	non, Esq.				
		Signature of Attorn Robert H. Solon					
		24 East Park Av					
		Suite 200	/ 44564				
		Long Beach, N\ 516-432-1622 F	Fax: 516-432-1713				
		rob@solomonla					
		Name of law firm					

United States Bankruptcy Court Eastern District of New York

In re	Ralph J. Mowery			
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

USBC-44 Rev. 9/17/98

CCS
Payment Processing Center
PO Box 55126
Boston, MA 02205

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

CityMD 1345 RXR Plaza Uniondale, NY 11556

Kelly Stacey Mowery

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

LVNV Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

Prohealth Care Assoc PO Box 3475 Toledo, OH 43607-0475

Quest Diagnostics PO Box 7306 Hollister, MO 65673-7306

Santander Consumer USA Attn: Bankruptcy Po Box 961245 Fort Worth, TX 76161

Seterus, Inc. Attn: Bankruptcy Po Box 1077 Hartford, CT 06143 Shapiro Dicaro Barak 175 Mile Crossing Blvd. Rochester, NY 14624

Sunrise Medical Lab PO Box 9070 Hicksville, NY 11802-9070

Syracuse University Proj 400 Ostrom Avenue Syracuse, NY 13244-3250

Tate & Kirlin Associates 580 Middletown Blvd Suite 240 Langhorne, PA 19047

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Ralph J. Mowery	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure towledge, information and belief:
was pending at any taspouses or ex-spouse partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the]
■ NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
☐ THE FOLLOWI	NG RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PEND	DING (Y/N):	[If closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	CH CASES ARE RELATED (1	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PEND	DING (Y/N):	[If closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	CH CASES ARE RELATED (1	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PEND	DING (Y/N):	[If closed] Date of closing:

	2/01/19 11:56AN
DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Discharge	ed/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE	above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("R SCHEDULE "A" OF RELATED CASE:	EAL PROPERTY") WHICH WAS ALSO LISTED IN
NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have be eligible to be debtors. Such an individual will be required to file	we had prior cases dismissed within the preceding 180 days may not a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNE	Y, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/N): <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or debt	cor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy case is as indicated elsewhere on this form.	not related to any case now pending or pending at any time, except
/s/ Robert H. Solomon, Esq.	
Robert H. Solomon, Esq. Signature of Debtor's Attorney Robert H. Solomon, P.C. 24 East Park Avenue	Signature of Pro Se Debtor/Petitioner
Suite 200 Long Beach, NY 11561 516-432-1622 Fax:516-432-1713	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009